Case 19-27068-SLM Doc 32 Filed 07/29/20 Entered 07/29/20 22:27:56 Desc Main Document Page 1 of 9

Fill	in this information to	identify your cas	se:								
D	ebtor 1	Joseph	A. De	Nola							
		First Name	Middle Name Las	t Name							
	ebtor 2										
(S	Spouse, if filing)	First Name	Middle Name Las	t Name				_	Check if this is:		
U	nited States Bankrup	otcy Court for the:	Distri	ct of New Jersey				_	An amended fili	-	
_	ase number known)	19-2	7068						A supplement s chapter 13 inco		ostpetition the following date:
									MM / DD / YYY	Υ <u>Υ</u>	
Of	ficial Form	106I									
Sc	chedule I:	Your In	come								12/15
nfo spo addi	rmation. If you are use is not filing with	married and not n you, do not ind your name and c	le. If two married people are f filing jointly, and your spouse lude information about your ase number (if known). Answ	e is living with you spouse. If more s	u, in pac	clude inforr	nation about	your spo	ouse. If you are s	eparated	and your
1.	Fill in your employ information.	ment		Debtor 1					Debtor 2 or nor	n-filing sp	ouse
	If you have more that		Employment status	⊈ Employed □	Not	t Employed			Employed ☑ Not	Employed	
	attach a separate p information about a employers.	•	Occupation	<u>IT</u>							
	Include part time, so self-employed work	•	Employer's name	Presidio Network	k Sc	olutions					
	Occupation may inc	clude student	Employer's address	1 Penn Plaza Number Street				Nu	mber Street		
	or homemaker, if it	applies.									
				New York, NY 10	0019)					
				City		State	Zip Code	Cit	у	State	Zip Code
			How long employed there?	3 years		<u> </u>		_		_	
Pa	art 2: Give Deta	ails About Mo	nthly Income								
		income as of the	e date you file this form. If you	have nothing to re	eport	t for any line	, write \$0 in th	ne space.	Include your non-	filing spou	ıse unless you
	are separated. If you or your non-fi attach a separate s		more than one employer, comb	ine the information	for	all employer	s for that pers	son on the	lines below. If yo	u need mo	ore space,
	allacir a separate s					For	Debtor 1		ebtor 2 or		
								non-fi	iling spouse		
2.			nd commissions (before all paulate what the monthly wage wo		2.	\$	16,605.57		\$0.00		
3.	Estimate and list n	nonthly overtime	э рау.		3.	+	\$0.00	+	\$0.00		
		A	" 0] []	
4.	Calculate gross in	come. Add line 2	+ iine 3.		4.	\$	16,605.57	I I	\$0.00	1	

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Debtor 1 Joseph DeNola Case number (if known) 19-27068 First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$16,605.57 Copy line 4 here.....→ 4. \$0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$4,863.27 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance \$918.55 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5q. Union dues 5g. \$0.00 \$0.00 \$0.00 5h. Other deductions. Specify: _ 5h. \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$5,781.82 \$0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$10,823.75 \$0.00 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts. ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 \$0.00 \$0.00 \$0.00 8b. Interest and dividends 8h. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation 8d. \$0.00 \$0.00 \$0.00 8e. Social Security 8e. \$1,316.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$0.00 \$0.00 Specify: _ 8g. Pension or retirement income 8g. \$0.00 \$0.00 \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 \$1,316.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse \$1,316.00 \$12,139.75 10. \$10.823.75 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that \$12,139.75 amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income Do you expect an increase or decrease within the year after you file this form? **✓**No. Yes. Explain:

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Fill in this information	to identify your case:			
Debtor 1	Joseph First Name	A. Middle Name	DeNola Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing ☐ A supplement showing postpetition
United States Bankruptcy Court for the:			District of New Jersey	chapter 13 income as of the following date:
Case number (if known)	19-2706	3		MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Your Household	ı			
1.	Is this a joint case?				
	✓No. Go to line 2.				
	Yes. Does Debtor 2 live in a separa	ate household?			
	No	Winial Farms 400 L O. Firmannan fan Car	annata I lawa ah alal af Dahtau O		
		fficial Form 106J-2, Expenses for Sep	parate Houseriold of Deptor 2.		
2.	Do you have dependents? Do not list Debtor 1 and Debtor 2.	☑ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent age	's Does dependent live with you?
	Do not state the dependents' names.	cash asponderium			No.
					No. Yes.
					No. Yes.
					— No. ☐Yes.
					No. Yes.
3.	Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			
Pa	art 2: Estimate Your Ongoing N	Monthly Expenses			
	timate your expenses as of your bankr bankruptcy is filed. If this is a suppler				o report expenses as of a date after
	clude expenses paid for with non-cash ch assistance and have included it on				Your expenses
4.	The rental or home ownership expens ground or lot.	ses for your residence. Include first n	nortgage payments and any rent for the	4.	\$3,516.83
	If not included in line 4:				
	4a. Real estate taxes			4a.	\$0.00
	4b. Property, homeowner's, or renter's i	insurance		4b.	\$0.00
	4c. Home maintenance, repair, and upke	eep expenses		4c.	\$300.00
	4d. Homeowner's association or condor	minium dues		4d.	\$0.00

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Debtor 1 Joseph A. DeNola Case number (if known) 19-27068

First Name Middle Name Last Name

	You	rexpenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a. ——	\$300.00
6b. Water, sewer, garbage collection	6b	\$75.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$470.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$800.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$100.00
Personal care products and services	10.	\$80.00
Medical and dental expenses	11	\$150.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$675.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. ——	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$545.00
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$415.96
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1	Joseph First Name	A. Middle Name	DeNola Last Name	Case number (if know	vn) <u>19-27068</u>
21. Other. Sp	ecify:	See Additional Page		21. +	\$3,060.00
22. Calculate	your monthly exper	ises.		_	
22a. Add I	nes 4 through 21.			22a	\$10,587.79
22b. Copy	line 22 (monthly exp	enses for Debtor 2), if any	from Official Form 106J-2	22b	\$0.00
22c. Add li	ne 22a and 22b. The	result is your monthly exp	enses.	22c	\$10,587.79
23. Calculate	your monthly net in	come.			
23a. Copy	line 12 (your combin	ed monthly income) from	Schedule I.	23a. <u> </u>	\$12,139.75
23b. Copy	your monthly expens	es from line 22c above.		23b. _	\$10,587.79
23c. Subtra	act your monthly expe	enses from your monthly ir	come.		04.554.00
The	result is your <i>monthl</i> y	/ net income.		23c	\$1,551.96
04 . D				f0	
For examp	• ole, do you expect to t	finish paying for your car lo	es within the year after you file this an within the year or do you expect yo modification to the terms of your more	pur	
☐ No. ☑ Yes.	Explain here: Debtor and Non-F	Filing Spouse do not curre	ntly have any retirement savings and	anticipate contributing to an account.	

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Debtor 1 Joseph A. DeNola Case number (if known) 19-27068

First Name Middle Name Last Name

	Amou
Other	
Accountant/Tax Prep Fees	\$30
Bank Fees/Service Charges	\$45
Professional Education/Certification Fees	\$15
Birthday/Holiday Gifts	\$50
Non-Filing Spouse's Debt Payments	\$500
Cigarettes	\$500
Anticipated Retirement/Savings Funds	\$1,920

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				_
Fill in this information t	o identify your case:			
Debtor 1	Joseph	A.	DeNola	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	otcy Court for the:		District of New Jersey	
Case number (if known)	19-27068			
(,				

☑ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct is schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$462,500.00 \$19,754.50 \$482,254.50
Part 2: Summarize Your Liabilities	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$422,502.31
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$11,130.71
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$24,867.61 \$458,500.63
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$12,139.75
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$10,587.79

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Case number (if known) 19-27068

DeNola

First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official \$17,457.34 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$11,130.71 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$12,716.71 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 9g. Total. Add lines 9a through 9f. \$23,847.42

Debtor 1

Joseph

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Fill in this information to	o identify your case:		
Debtor 1	Joseph	A.	DeNola
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankrup	otcy Court for the:		District of New Jersey
Case number (if known)	19-27068		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorn	ey to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the sumr	nary and schedules filed with this declaration and that they are true and correct.
V	
/s/ Joseph A. DeNola Joseph A. DeNola, Debtor 1	